RECORDING REQUESTED BY AND WHEN RECORDED MAIL TO:		
CITY CLERK'S OFFICE		
CITY OF RENTON		
1055 SOUTH GRADY WAY		
RENTON, WA 98057		
DECLARATION OF COV PROHIBITING USE OF LEACHA	, ,	
Grantor:	<u>_</u>	
Grantee: City of Renton		
Legal Description:		
Additional Legal(s) on:		
Assessor's Tax Parcel ID#:		
IN CONSIDERATION of the approved	d City of Renton	permit for
application file No. LUA/SWP	relating to real property legally	y described
above, the undersigned as Grantor(s), declares(	(declare) that the above described propert	y is hereby
established as having a prohibition on the use o	of leachable metals on those portions of the	ne property

exposed to the weather for the purpose of limiting metals in stormwater flows and is subject to the following restrictions.

The Grantor(s) hereby covenants(covenant) and agrees(agree) as follows: no leachable metal surfaces exposed to the weather will be allowed on the property. Leachable metal surfaces means a surface area that consists of or is coated with a non-ferrous metal that is soluble in water. Common leachable metal surfaces include, but are not limited to, galvanized steel roofing, gutters, flashing, downspouts, guardrails, light posts, and copper roofing. City of Renton or its municipal successors shall have a nonexclusive perpetual access easement on the Property in order to ingress and egress over the Property for the sole purposes of inspecting and monitoring that no leachable metal is present on the Property.

This easement/restriction is binding upon the Grantor(s), its heirs, successors, and assigns unless or until a new drainage or site plan is reviewed and approved by the City of Renton or its successor.

IN WITNESS WHERE, 20		n of Covenant is executed this day of
		GRANTOR, owner of the Property
		GRANTOR, owner of the Property
STATE OF WASHINGTON COUNTY OF KING	) )ss.	
On this day personally	appeared before me:	
their free and voluntary act and	and foregoing instrudeed, for the uses an	, to me known to be the individual(s) described ument and acknowledged that they signed the same and purposes therein stated day of
		Printed name Notary Public in and for the State of Washington,
		residing at
		My appointment expires